

**OHIO REVISED CODE 319.36 CLAIM FOR REFUND/ OR
CREDIT FROM OVERPAYMENT TRUST FUND**

Stark County Treasurer, Alexander A. Zumbar
110 Central Plaza S., Suite 250
Canton, Ohio 44702

Date: _____

*Please return this completed form within thirty (30) days from the date of
receipt to the Stark County Treasurer office for processing.*

Owner(s) of record 1/1/2020: _____

Parcel Number(s) _____ Tax Year 2020 Overpayment amount \$ _____

AFFIDAVIT

_____ being duly sworn testifies and says that
Claimant

_____ (are, were) the legal owner(s) of the real property

designated on the Stark County Treasurer's tax duplicate for the Tax Year 2020 with Permanent Parcel Number
_____. Claimant further says that for Tax Year 2020, the real estate taxes on said property
were overpaid in the amount of \$ _____ and is making this affidavit to verify that (he/she, they) paid said
taxes resulting in the overpayment.

Please select one of the following options:

☐ Option 1: Claimant hereby requests the overpayment to be refunded to:

Name: _____

Address: _____

Signature: _____ <or>

☐ Option 2: Claimant requests the overpayment to be credited on the next tax bill to the above Parcel Number

Signature: _____

Sworn to before me and subscribed in my presence this _____ day of _____, 2021

Seal _____

Notary Public

My commission expires _____